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REISSUE PATENT APPLICATION TRANSMITTAL

	Attorney Docket No. CGD-002.0 US				
Address to:	First Named Inventor Mark Pines				
Assistant Commissioner for Patents	Original Patent Number 6,028,075				
Box Patent Application Washington, DC 20231	Original Patent Issue Date (Month/Day/Year) 2/22/00				
	Express Mail Label No. EL378885135 US				
APPLICATION FOR REISSUE OF: (check applicable box) Utility F	Patent Design Patent Plant Patent				
APPLICATION ELEMENTS	ACCOMPANYING APPLICATION PARTS				
* Fee Transmittal Form (PTO/SB/56) (Submit an original, and a duplicate for fee processing)	7. Foreign Priority Claim (35 U.S.C. 119) (if applicable)				
2. Specification and Claims (amended, if appropriate)	8. Information Disclosure Copies of IDS Statement (IDS)/PTO-1449 Citations				
3. Drawing(s) (proposed amendments, if appropriate)	9. English Translation of Reissue Oath/Declaration (if applicable)				
4. Ressue Oath / Declaration (original or copy) (37 C.F.R. § 1.175)(PTO/SB/51 or 52)	10. Statement(s) Statement filed in prior application,				
5. Original U.S. Patent Offer to Surrender Original Patent (37 C.F.R. § 1.178)	11. Preliminary Amendment				
or Ribboned Original Patent Grant	Return Receipt Postcard (MPEP 503) (Should be specifically itemized)				
Affidavit / Declaration of Loss (PTO/SB/55)	13. Other: Assignment				
Original U.S. Patent currently assigned?	Request to Transfer Drawings from Original Patent				
Yes No	Reissue Request & Amendments				
(If Yes, check applicable box(es))					
Written Consent of all Assignees (PTO/SB/53 or 54) *NOTE FOR ITEMS 1 & 10: IN ORDER TO BE ENTITLED TO PAY SMALL ENTITY FEES, A SMALL ENTITY STATEMENT IS REQUIRED					
X 37 C.F.R. § 3.73(b) Statement X Power of Attorney (37 C.F.R. § 1.27), EXCEPT IF ONE FILED IN A PRIOR APPLICATION IS RELIED UPON (37 C.F.R. § 1.28).					
14. CORRESPONDEN	CE ADDRESS				
Customer Number or Bar Code Label (Insert Customer No. or Attach bar code label here) or X Correspondence address below					
Name Leon R. Yankwich					
Yankwich & Associates					
130 Bishop Allen Drive					
City Cambridge State Country USA Telephone	MA Zip Code 02139 (617) 491-4343 Fax (617) 491-8801				
	(011) 431-0001				
NAME (Pont/Type) Leon R. Yankwich	Registration No. (Attorney/Agent) 30,237				
Signature her 21 te	Date 12-19-2900				

PTO/SB/56 (12-97) Approved for use through 9/30/00. OMB 0651-0033

	Patent and Trademark	Office: U.S. DEP	ARTMENT OF COM	MERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respo	nd to a collection of informa	tion unless it displa	rys a valid OMB contro	ol number

REISSUE APPLICATION FEE TRANSMITTAL FORM					Docket Number (Optional) CGD-002.0 US									
Claims as Filed - Part 1						- COD-00	72.0 03							
Clai	ma in				<u> 11ea -</u>	(3)	Small	=ntity	Т	Other than	a Small Entity			
	ms in itent	For		er Filed in Application	' '		Number Extra				Fee	ť	Rate	Fee
(A)	3	Total Claims (37 CFR 1.16(j))	(B)	3	****	0 =	x \$ <u>9</u> =	0		x \$ =	1 00			
(C)	1	Independent Claims (37 CFR 1.16(i))	(D)	1	*	0 =	x \$ <u>40</u> =	0	or	x \$ =				
Basic Fee (37 CFR 1 16/h))					\$									
				To	otal F	iling Fee		\$355		OR	\$			
			Clain	ns as Amen	nded	- Part 2								
		(1) Claims Remainii	nal	(2) Highest Nur	mber	(3) Extra	Small E	ntity		Other than	a Small Entity			
		After Amendme	nt	Previous Paid Fo	ly	Claims Present	Rate	Fee		Rate	Fee			
(37 CF	Claims R 1.16(j))	*** 3	MINUS			*= 0	x\$ <u>9</u> =	0	or	x \$=				
Indepen Claims (dent 37 CFR 1 1	6(i)) *** 1	MINUS	***** 1		= 0	x \$ <u>40</u> =	0	01	x \$=				
						Additional	Fee	\$ 0		OR	\$			
** If the entry in (D) is less than the entry in (C), Write "0" in column 3. ** If the "Highest Number of Total Claims Previously Paid For" is less than 20, Write "20" in this space. **** After any cancelation of claims ***** After any cancelation of claims ***** If "A" is greater than 20, use (B -A); if "A" is 20 or less, use (B - 20). ***** "Highest Number of Independent Claims Previously Paid For" or Number of Independent Claims in Patent (C). Please charge Deposit Account No in the amount of A duplicate copy of this sheet is enclosed. The Commissioner is hereby authorized to charge any additional fees under 37 CFR 1.16 or 1.17 which may be required, or credit any overpayment to Deposit Account No 50-0268														
Typed or printed name														

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:

Pines et al.

for Reissue of:

U.S. Pat. No. 6,028,075

Issued:

February 22, 2000

Based on Ser. No.:

08/797,703

Filed:

February 11, 1997

Entitled:

QUINAZOLINONE CONTAINING

PHARMACEUTICAL

COMPOSITIONS FOR PREVENTION OF NEOVASCULARIZATION AND FOR TREATING MALIGNANCIES

Attorney Docket No.: CGD-002.0 US

Assistant Commissioner for Patents

BOX REISSUE

Washington, D.C. 20231

CERTIFICATE OF MAILING BY "EXPRESS MAIL"

The undersigned hereby certifies that the correspondence listed below is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" Service under 37 CFR §1.10, postage prepaid, in an envelope addressed to the Asst. Commissioner for Patents, BOX REISSUE, Washington, D.C. 20231 on the date indicated below.

- 1. Reissue Application Pursuant to 35 U.S.C. §251
- 2. Transmittal Form PTO/SB/50
- 3. Fee Transmittal Form PTO/SB/56
- 4. Request to Transfer Drawings from Original Patent
- 5. Establishment of Ownership & Consent of Assignees
- 6. Declaration by the Inventors
- 7. Offer to Surrender Patent
- 8. Assignment
- 9. Original U.S. Pat. No. 6,028,075
- 10. Cut-up copies of original patent
- 11. Check # **3325** in the amount of \$355.00
- 12. Return receipt postcard

EL378885135US

Express Mailing Label No. =

date of deposit: December 20, 2000

Stephanie L. Pytlak

YANKWICH & ASSOCIATES

130 Bishop Allen Drive Cambridge, MA 02139

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Reissue Application of: Pines et al.

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Atty. Docket No.: CGD-002.0 US

Asst. Commissioner for Patents

BOX REISSUE

Washington, D.C. 20231

REQUEST TO TRANSFER DRAWINGS FROM ORIGINAL PATENT

Sir:

Pursuant to 37 C.F.R. §1.174, Applicants request that the drawings of the original patent, a copy of which is enclosed herewith, be transferred as formal drawings to the enclosed reissue application.

No alteration or correction has been made to these drawings.

Respectfully submitted,

Leon R. Yankwich, Reg. No. 30,237 David G. O'Brien, Reg. No. 46,125

Attorney's for Applicants

YANKWICH & ASSOCIATES

130 Bishop Allen Drive Cambridge, MA 02139

telephone: (617) 491-4343 telecopier: (617) 491-8801

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

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Atty. Docket No.: CGD-002.0 US

Asst. Commissioner for Patents

BOX REISSUE

Washington, D.C. 20231

ESTABLISHMENT OF OWNERSHIP PURSUANT TO 37 C.F.R. §3.73(b) and CONSENT OF ALL ASSIGNEES TO FILING OF REISSUE APPLICATION

Sir:

By virtue of an assignment executed by the inventors Mark Pines and Arnon Nagler on May 30, 1997 and recorded at Reel 9286/Frame 0993 transferring all right, title, and interest in the above-referenced U.S. patent jointly to (1) Hadasit Medical Research Services and Development Company Ltd., Kiryat Hadassah, 91120 Jerusalem, Israel and (2) Agricultural Research Organization, Ministry of Agriculture, The Volcani Center, 50250 Bet Dagan, Israel, the undersigned officers of the respective Assignees, pursuant to 37 C.F.R. §3.73(b), hereby affirm their joint ownership of U.S. Pat. No. 6,028,075. A copy of the executed assignment and Notice of Recordation is enclosed.

All assignees hereby consent to the filing of a reissue application pursuant to 35 U.S.C. §251.

All assignees hereby appoint Leon R. Yankwich (Reg. No. 30,237) and David G. O'Brien (Reg. No. 46,125), of Yankwich & Associates, 130 Bishop Allen Drive, Cambridge, Massachusetts 02139 (USA) as their attorneys to file and prosecute said reissue application.



CONSENT OF ASSIGNEES TO FILE REISSUE APPLICATION

I declare that I am an official of the Assignee company/organization identified below who is authorized to execute this document on its behalf. I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Title 18, United States Code, §1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon, or any patent to which this declaration is directed.

(1)	The Hadasit Medical Research Services and Development Company Ltd., assignee of
	Pat. No. 6,028,075, hereby consents to the filing of the present reissue application for the sue of U.S. Pat. No. 6.028,075.
rdis	sue of ILS. Pat. No. 6.028.075.

lical research services evelopment ltd.

Name: Dr. Rafi Hofstein

Title: General Manager

Hadasit Medical Research Services and Development Company, Ltd. For:

The Agricultural Research Organization, assignee of U.S. Pat. No. 6,028,075, hereby consents to the filing of the present reissue application for the reissue of U.S. Pat. No. 6,028,075.

Name:

(2)

Title: For:

HEAD OF A.R.O.

2

PTO/SB/53 (12-97)

Approved for use through 9/30/00. OMB 0651-0033

Patent and Trademark Office; U.S DEPARTMENT OF COMMERCE

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REISSUE APPLICATION BY THE INVENTOR, OFFER TO SURRENDER PATENT

Docket Number (Optional)

CGD-002.0 US

			806 U.S.
This is part of	the application for a reissue patent ba	sed on the original patent identifi	ied below.
lame of Patentee Mark Pines, Isra Patent Number	e(s) ael Vlodavsky, Arnon Nagler, Hua-Qu 6,028,075	an Miao Date Patent Issued Feb. 22, 1998	3
Title of Invention	Quinazolinone Containing Pharmace Neovascularization and for Treating		on of
I am the inver	ntor of the original patent.		
I offer to surre	ender the original patent.		
1. 🗷 File	ed herein is a certificate under 37 CFF	3.73(b).	
	nership of the patent is in the inventor on made.	(s), and no assignment of the pa	itent has
One of boxes	1 or 2 above must be checked.		
The written co	onsent of all assignees owning an und In for reissue.	ivided interest in the original pate	ent is included in
Signature	Max Pines	Date 2/11/60	
Typed or printed Mark Pines,			
	owning an undivided interest in said o ee consents to the accompanying app		7
statements ma were made wit fine or imprisor	re that all statements made herein of inde on information and belief are belied in the knowledge that willful false statement, or both, under 18 U.S.C. 1001 validity of the application, any patent directed.	ved to be true; and further that the ments and the like so made are and that such willful false statem	nese statements punishable by nents may
Name of assign			
	al Research Services & Development rson signing for assignee		ch Organization
		Date	
	d name and title of person signing for	assignee	
see consent	document attached)		

Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

REISSUE APPLICATION BY THE INVENTOR, OFFER TO SURRENDER PATENT

Docket Number (Optional)

CGD-002.0 US

This is part of the application for a reissue patent based on the original patent identified below. Name of Patentee(s) Mark Pines, Israel Vlodavsky, Arnon Nagler, Hua-Quan Miao Date Patent Issued Patent Number 6,028,075 Feb. 22, 1998 Title of Invention Quinazolinone Containing Pharmaceutical Compositions for Prevention of Neovascularization and for Treating Malignancies I am the inventor of the original patent. I offer to surrender the original patent. Filed herein is a certificate under 37 CFR 3.73(b). Ownership of the patent is in the inventor(s), and no assignment of the patent has been made. One of boxes 1 or 2 above must be checked. The written consent of all assignees owning an undivided interest in the original patent is included in this application for reissue. Signature Oct. 10, 2000 Typed or printed name Israel Vlodavsky, co-inventor The assignee owning an undivided interest in said original patent is (set forth below) and the assignee consents to the accompanying application for reissue. I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application, any patent issued thereon, or any patent to which this declaration is directed. Name of assignee Hadasit Medical Research Services & Development Co. Ltd. and Agricultural Research Organization Signature of person signing for assignee Date Typed or printed name and title of person signing for assignee (see consent document attached)

PTO/SB/53 (12-97)

Approved for use through 9/30/00. OMB 0651-0033

Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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REISSUE APPLICATION BY THE INVENTOR, OFFER TO SURRENDER PATENT Docket Number (Optional)

CGD-002.0 US

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REISSUE APPLICATION BY THE INVENTOR, OFFER TO SURRENDER PATENT

Docket Number (Optional)

CGD-002.0 US

	74. S.				
This is part of the application for a reissue patent ba	ased on the original patent identified below.				
Name of Patentee(s) Mark Pines, Israel Vlodavsky, Arnon Nagler, Hua-Qu	I and the second				
Patent Number 6,028,075	Date Patent Issued Feb. 22, 1998				
Title of Invention Quinazolinone Containing Pharmace Neovascularization and for Treating	eutical Compositions for Prevention of Malignancies				
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I offer to surrender the original patent.					
1. X Filed herein is a certificate under 37 CFF	R 3.73(b).				
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One of boxes 1 or 2 above must be checked.	•				
The written consent of all assignees owning an uncerthis application for reissue.	divided interest in the original patent is included in				
Signature / Manuar //	Date 10/16/00				
Typed or printed pame Hua-Quan Miao, co-inventor					
The assignee owning an undivided interest in said o and the assignee consents to the accompanying ap					
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application, any patent issued thereon, or any patent to which this declaration is directed.					
Name of assignee					
Hadasit Medical Research Services & Development					
Signature of person signing for assignee	Date				
Typed or printed name and title of person signing for	assignee				
(see consent document attached)					